State of California-Environmental Protection Agency

Approved OMB No. 2050–0039 (Expires 9-30-96)  print or type. Form designed for use on elite (12-pitch) writer.	"Amongot of		Sacramento, California
	Nanifest Document No.	2. Page 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address	A. State	Vanifest Documen	Number
ROBING REALTY CORP.			96603519
- V69 LAKEWOOD BL. STH FLUOR FOMB BEACH, CA. 188	(선원~ + 7이전 B. State C	Senerator's ID	
4. Generator's Phone (582 ) 627 – 3078	C 5444	ransporter's ID	
5. Transporter 1 Company Name 6. US EPA ID Number CAD 98081	X8 3		
Taran alexander by part by			446) 120 4270 9
7. Transporter 2 Company Name 8. US EPA ID Number	E. State 1	ransporter's ID	
	F. Transp	orter's Phone	
9. Designated Facility Name and Site Address 10. US EPA ID Number	G. State	Facility's ID	00000608
COPPER MOUNTAIN LANDFILL / AVE.35E AND COUNTY	12TH ST. H. Facility	(K /CUU)	<u> CONPANI</u>
	6114		52 <b>0) 782-6355</b>
US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers	13. Total	14. Unit
	No. Type	Quantity	Wt/Vol I Waste Number
MON RORA HAZARDOUS WASTE SOLID			611
SOIL CONTAMINATED WITH METALS)	001/01	00018	Y EPA/OtheN/A
b.			State
			EPA/Other
			Sigie
с.			9-22
•			EPA/Other
d.			Sittle
			EPA/Other
		ng Codes for Wa	the Listed About
I. Additional Descriptions for Materials Listed Above	G.	2	b.
11a. PROFILE # 12660	10	))	
	, C.		d.
15. Special Handling Instructions and Additional Information	<u> </u>		
WEAR APPROPRIATE PROTECTIVE EQUIPMENT	SITE: 1414 D	ENKER ST.	
24 HR. EMERGENCY CONTACT: (800) 535 5053	TORRAN		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are full packed, marked, and labeled, and are in all respects in proper condition for transport by high	ully and accurately described	above by proper	shipping name and are classified, national appearance.
If I am a large quantity generator, I certify that I have a program in place to reduce the economically practicable and that I have selected the practicable method of treatment, storage	ne, or disposal currently ave	allable to me which	n minimizes me present and totore
threat to human health and the environment; OR, if I am a small quantity generator, I have waste management method that is available to me and that I can afford.	made a good faith effort	to minimize my w	aste generation and select the best
Printed/Typed Name  Signature  Signature	de o		Month Day Yea
MITAMASE SIK	STONALE		10087
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Signature	<del>-</del> /\		Month Day Year
BILL KOWAN BU	Ama		1000
18. Transporter 2 Acknowledgement of Receipt of Materials			Month Day Year
Printed/Typed Name Signature			
19. Discrepancy Indication Space			
n			
AZ NON LIM			à
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this ma	nifest except as noted in Iter	n 19.	
Printed/Typed Name Signature	1/10-		Month Day Year
SHAKON KOBERSON LYNUM	KOYOR	1000	1/01/0197
DO NOT WRITE BELOW	THIS LINE.		

TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS.
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)